STATE OF NEW HAMPSHIRE

2017 Statement of Income and Expenses for LOBBYISTS

(RSA Chapter 15)

PLEASE PRINT

All reportable transactions occurring in the months prior to the reporting date relative to the following client: Quantitative Management Associates LLC (Full Name of Client as it appears on the Lobbyist Registration Form) OR All reportable transactions by the lobbyist (including the lobbyist's family), or the lobbying firm listed below which are unrelated to any particular client. IV. Date of Report April 26, 2017 July 26, 2017 January 31, 2018 activity from date of registration to 3/31/17 activity from 4/1/17 to 6/30/17 October 25, 2017 January 31, 2018 activity from 7/1/17 to 9/30/17 activity from 10/1/17 to 12/31/17 V. There have been no fees received and no reportable transactions made since the last report. If this box is checked, complete just this form and submit it to the Secretary of State's Office, State House, Room 204, Concord, NH 03301. VI. Check if additional reports are attached: If you have received fees or made expenditures, you must file Addendum B— Report of Honorariums or Expense Reimbursement	I. Name of Lobbyist(s) Bradford J Allii	nson		- Company of the party of
Name of partnership, firm or corporation) 100 Mulberry Street Gateway Center Two, Floor 6 Newark NJ 07102 Business Address: (Street) (Flown/City) (State) (Zip Code) 100 Mulberry Street Gateway Center Two, Floor 6 Newark NJ 07102 101	II. Name of lobbyist's partnership, firm or co	rporation, if any:		
Business Address: (Street) (Town/City) (State) (Zip Code) (P373-367-5115 (Pax) (Pax) III. This statement covers: (Choose one – file separate reports for each client, OR you may file a separate report for reportable expense transactions which are not attributable to any one client). All reportable transactions occurring in the months prior to the reporting date relative to the following client: Quantitative Management Associates LLC (Full Name of Citent as it appears on the Lobbyist Registration Form) OR All reportable transactions by the lobbyist (including the lobbyist's family), or the lobbying firm listed below which are unrelated to any particular client. IV. Date of Report April 26, 2017 January 31, 2018 Activity from 4/1/17 to 4/30/17 October 25, 2017 Activity from 7/1/17 to 9/30/17 Activity from 10/1/17 to 12/31/17 V. There have been no fees received and no reportable transactions made since the last report. If this box is checked, complete just this form and submit it to the Secretary of State's Office, State House, Room 204, Concord, NH 0/30/1. VI. Check if additional reports are attached: If you have received fees or made expenditures, you must file Addendum B— Report of Honorariums or Expense Reimbursement If you have paid an honorarium or reimbursed expenses, you must file Addendum B— Report of Honorariums or Expense Reimbursement If you, your firm, or your family has made political contributions, you must file Addendum C— Political Contributions Sworn Statement/Affirmation by Lobbyist I have read RSA 15, RSA 15-B, RSA 14-C and RSA 664 and hereby swear or affirm that the foregoing information is true and complete to the best of myknowledge and belief. (Signature of logicy)st) Bradford J Allinson	Quantitative Management As	sociates LLC		
Business Address: (Street) (Town/City) (State) (Zip Code) 973-367-5115 () 973-367-1372 e-mail brad.allinson@qmassociates.com Part Part	(Name of partnership, firm or corp	oration)		
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